

To Clerk: Do not issue summons until request is granted or filing fee is paid.

IN THE DISTRICT/SUPERIOR COURT FOR THE STATE OF ALASKA
AT ANCHORAGE

JAMES L. HALL #987 (PRO-SE)

Plaintiff,

vs.

- COTTE, ETAL.

- BETS, SELF

- LELTON TURPIN

Defendant.

CASE NOS. (A05-0226 CV. (JWS)
(A05-0219 CV. (JWS)
(A05-0160 CV. (RRB))

REQUEST FOR EXEMPTION
FROM PAYMENT OF FEES

I, JAMES L. HALL, request exemption from payment of the fees listed in Administrative Rule 9(f)(1) due to my financial inability to pay.

FINANCIAL STATEMENT

Phone: N/A (ACC-WEST) Date of Birth: 2/1/1964

Residence Address: ACC-WEST, 1300 E. 4TH AVE, ANCHORAGE, AK 99501

Mailing Address: ACC-WEST, " " " " " "

Present Employer: N/A

(If not now employed, state last employer and date terminated)

Employer's

Address: N/A

Employer's

Phone: N/A

1. INCOME INFORMATION (after taxes, but before other deductions)

a.	You	Your Spouse
Income during last 12 months:		
Wages	<u>0</u>	<u>0</u>
Public Assistance	<u>0</u>	<u>0</u>
Unemployment	<u>0</u>	<u>0</u>
Other	<u>0</u>	<u>0</u>
(Specify)		
TOTAL:	<u>0</u>	<u>0</u>
b. Current monthly income from all sources:	<u>0</u>	<u>0</u>

2. FAMILY MONTHLY EXPENSES:

Food	<u>0</u>
Rent	<u>0</u>
Utilities	<u>0</u>
Car payments	<u>0</u>
Furniture & Equipment payments	<u>0</u>
Child support or alimony	<u>0</u>
Loans/Time payments	<u>0</u>
TOTAL EXPENSES:	<u>0</u>

3. FAMILY ASSETS – Present Value:

Cash on hand or
in bank 0
Land, buildings or
trailers 0
Cars 0
Snow machines, boats
airplanes or other
motor vehicles
(except cars) 0
Securities: stocks,
bonds, notes 0
Businesses 0
Other Assets:
0 0
0 0
0 0

TOTAL ASSETS: _____

4. FAMILY DEBTS:

Mortgages 0
Loans 0
Charge cards 0
Other (bills, etc.):
CREDITORS \$50,000 +
0 0
0 0

TOTAL DEBT: \$50,000 +

5. DEPENDENTS: Name

N/A
S

Age

N/A
S

Relationship

N/A
S

I swear or affirm that this financial statement is true. I understand that if I give false information in the financial statement, I may be prosecuted for perjury.

7/6/07

Date

James Hall

Signature of Plaintiff/Defendant

Subscribed and sworn to or affirmed before me at Anchorage, AlaskaJuly 16 2007

(date)

Rebecca L. Comart

Notary Public/Judge/Court Clerk

My Commission Expires: With Office

ORDER

I hereby order that the request for exemption from payment of fees is:

- ☒ GRANTED. Plaintiff/Defendant is exempted from payment of the fees specified in Administrative Rule 9(f)(1).
☐ DENIED. Any fees now due in this case must be paid before any further action is taken. If payment is not made within 30 days after notice of the order, the court may dismiss the action. Admin. Rule 10(d).

Date

Judge/Magistrate

I certify that on _____
a copy of this order was sent to:

Type or Print Name

Clerk: _____

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REQUEST FOR EXEMPTION FROM PAYMENT OF FEES

Adm. R. 9(f)(1) and 10
Civil R. 90.3